S1PTO/SB/01 (03-01)
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					Attorney Docket	Number	METSO-65						
	DECLARA			ITY OR	First Named Inv	entor	Kari Räisänen						
	рате	DESIGN NT APPLI			COMPLETE IF KNOWN								
	IAIL	(37 CFR 1.			Application Num	ber							
П	Declaration	П	Declarati Submitte Filing (su	ion	Filing Date								
	Submitted with Initial	OR		ed after Initial	Group Art Unit								
	Filing		(37 CFR Required	1.16 (e))	Examiner Name								
As a b	As a below named inventor, I hereby declare that:												
Му гез	My residence, mailing address, and citizenship are as stated below next to my name.												
I believe I am original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural Names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:													
	Multi-Layer Web Formation Section												
								ŀ					
				(Title of the	Invention)								
The spe	cification of which	l		(======	,								
	Is attached hereto OR												
was filed on (MM/DD/YYYY)  02/11/2005  as United States Application Number or PCT Inter						er or PCT Internat	ional						
	_				1								
Applica	Application Number PCT/FI2 0		and was amended or		ı (MM/DD/YYYY)			(if applicable).					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.												
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.													
I hereby	claim foreign prio	rity benefits unde		C. 119(a)-(d) or (f), or 365									
below a	nd have also identi	fied below, by che	cking the	application which design box, any foreign applicat	ion for patent, invent	or's or plant bree							
Prior	ional application ha Foreign Application			t of the application on wh  Foreign Filing D	nich priority is claime	d. Priority	Certifie	l Copy Attached?					
	Number(s) Country (MM/DD/Y)		(MM/DD/YYY	<u>Y)</u> I	Not Claimed	YES	NO						
	20040225	F	I	02/13/2004		H							
						Ï							
	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:												

Burden Hour Statement: this form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEEWS OF COMLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner of Patents, Washington, DC 20231

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:		Customer Num or Bar Code La		36528	Or		Correspondence address below			
Name:										
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor										
Given Name			Family Name							
(first and middle [if any]): Kari or Surname: Räisänen										
Inventor's Signature Date: 11.8,2006										
Residence: City: Muurame	State:	Cou		ry: <b>Fi</b>	nland	Citizenship: FI				
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City: <b>Muurame</b>	State:			Zip:	FI-40	950	Country: Finland			
NAME OF SECOND INVENT	OR:			A pet	ition ha	ıs been file	d for this unsigned inventor			
Given Name Family Name										
(first and middle [if any]): An			or Surname: Poikolainen							
Inventor's Signature	Per	Q	$\supseteq$				Date: 16,8.2006			
Residence: City: <b>Jyväskylä</b>	. ;	State:		Coun	try: <b>Fi</b>	nland	Citizenship: FI			
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City: <b>Jyväskylä</b>	State:			Zip: I	TI-402	250	Country: Finland			
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.										